

UNITED STATES POSTAL SERVICE



0000116537



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

RECEIVED

2002 MAY 10 A 11: 17

Arizona Corp. Commission  
Ticket Control  
200 W Washington St  
5007-2996

AZ CORP COMMISSION  
DOCUMENT CONTROL

**SENDER:**

- Complete items 1, 2 and 3.
- Indicate if restricted delivery is desired.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following service (for an extra fee):

**Restricted Delivery**

Consult postmaster for fee.

**1. Article Addressed to:**

**Michelle L. Webb**  
**Webb Financial Group**  
**Michelle Webb Financial Group**  
**1511 East Gaffney**  
**New River, AZ 85087**

**2. Article Number**

7180 5335 1300 0000 4325

**3. Service Type**

☒ **CERTIFIED**

**Date of Delivery**

5-7-02

**Received By: (Print Name)**

MICHELLE L. WEBB

**Signature - (Addressee or Agent)**

Michelle Webb

Enter delivery address if different than item 1.